•										Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR									10736993					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			 OR	OTHER		
TOTAL CLAIMS			19				.	RATE		FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		385.00	OR	BAȘIC FEE	770.Q0	
TOTAL CHARGEABLE CLAIMS			19 minus 20=		• 0			X\$ 9=		•	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		' O			X43=			OR	X86=	-:	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT						+145=		OR	+290=		
• ii	the difference	in column 1 is	less than ze	ero, enler	"0" in c	•			L		OR	TOTAL	770	
•										2000	1~,,	OTHER		
3.17.05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							_	SMAL	L E	ENTITY	OR	SMALL	-	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	EST BER OUSLY	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
IDME	Total	· /9	Minus	·· 20		a _ ·	l	X\$ 9	=		OR	X\$18=	. /	
ME	Independent	• 1	Minus	چ	3			X43=			OR.	X86=	7.	
٩.	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				CLAIM	<u> </u>).	+145	_		OR	+290=		
								TOT ADDIT, F		· · · · · ·	ОЯ	TOTAL ADDIT, FEE	1/	
3.20.05 (Column 1) (Column 2) (Column 3)									EE !	•	3	AUUH. FEE		
3 L		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO	EST BER DUSLY:	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 19	Minus	" Z	0	=		X\$ 9:	_		OR	X\$18=		
	Independent	• /	Minus	·	3 ·	= -		X43=		•	OR	X86=	1	
لِــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_		OR	+290=	7.	
:								TOT ADDIT. FI			OR	TOTAL ADDIT, FEE	/ · ·	
(Column 1) (Column 2) (Column 3)										•	-	7		
U L		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	-	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N C	Total		Minus	**		= .		X\$ 9-			OR.	X\$18=		
\$ L	Independent	+	Minus	***		-	ľ	X43=	1		OR	. X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=												+290=		
											OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
T	he "Highest Num	ber Previously Paid	For (Total or	Independe	nl) is the	highest numbe	r loui	nd in the	appı	opriale box	in cot	umn t.		